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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	John First name A. Middle name Love Last name and Suffix (Sr., Jr., II, III)	Cherri First name J. Middle name Love Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4100	xxx-xx-8921

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Debtor 1 **John A. Love** Debtor 2 **Cherri J. Love**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	527 E. Front Ave Stockton, IL 61085	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Jo Daviess County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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		Jahn A. Lava		Document	Page 3 of 59)				
	otor 1 otor 2	John A. Love Cherri J. Love				Case number (if known)				
Par	t 2:	Tell the Court About \	our Bankrup	tcy Case						
7.	Bank	chapter of the ruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choo	sing to file under	Chapter 7	Chapter 7						
			☐ Chapter 1	1						
			☐ Chapter 1	2						
			☐ Chapter 1	3						
8.	How	you will pay the fee	about h order. I a pre-p	now you may pay. Typically, if you f your attorney is submitting your rinted address.	are paying the fee payment on your be	eck with the clerk's office in your local court fo yourself, you may pay with cash, cashier's ch ehalf, your attorney may pay with a credit card	eck, or money or check with			
				to pay the fee in installments. I ling Fee in Installments (Official F		tion, sign and attach the Application for Indivi	duals to Pay			
			but is n applies	ot required to, waive your fee, ar to your family size and you are u	nd may do so only if unable to pay the fee	ion only if you are filing for Chapter 7. By law, your income is less than 150% of the official pe in installments). If you choose this option, yo fficial Form 103B) and file it with your petition.	overty line that			
9.		you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.								
			D	istrict	When	Case number				
			D	istrict	When	Case number				
			D	istrict	When	Case number				
10.		ny bankruptcy s pending or being	■ No							
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.							
			D	ebtor		Relationship to you				
			D	istrict	When	Case number, if known				
			D	ebtor		Relationship to you				
			D	istrict	When	Case number, if known				
11.		ou rent your	■ No.	Go to line 12.						
	resid	ence?	☐ Yes. H	Has your landlord obtained an ev	iction judgment agai	nst you and do you want to stay in your reside	ence?			

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

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	otor 1 John A. Love otor 2 Cherri J. Love		Dodani	Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code			
	it to this petition.		Check the appropriate bo	ox to describe your business:			
			☐ Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
			■ None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is						
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to						
	public health or safety? Or do you own any						
	property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	0 · · · · · · · · ·			Number, Street, City, State & Zip Code			

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Debtor 1 **John A. Love** Debtor 2 **Cherri J. Love**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82939 Doc 1 Filed 12/21/16 Entered 12/21/16 15:00:44 Desc Main Document Page 6 of 59

Debtor 1 John A. Love Debtor 2 Cherri J. Love Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts I am not filing under Chapter 7. Go to line 18. 17. Are you filing under ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion **\$0 - \$50,000** □ \$1,000,001 - \$10 million estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John A. Love /s/ Cherri J. Love John A. Love Cherri J. Love Signature of Debtor 1 Signature of Debtor 2 Executed on December 20, 2016 Executed on December 20, 2016 MM / DD / YYYY MM / DD / YYYY

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		Document	Page 7 of 59		
Debtor 1 Debtor 2	John A. Love Cherri J. Love		9	e number (if known)	
•	attorney, if you are led by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e	xplained the relief available ur	nder each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the	information in the
		/s/ Mark E. Zaleski	Date	December 20, 2016	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Mark E. Zaleski			
		Printed name			
		Attorney Mark E. Zaleski			
		Firm name			
		10 N. Galena Ave., #220			
		Freeport, IL 61032			
		Number, Street, City, State & ZIP Code			

Email address

Contact phone **815-233-0995**

Bar number & State

attyzaleski@comcast.net

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	otor 1 John A. Love Otor 2 Cherri J. Love			Case nun	nber (if known)
Par	t 6: Answer These Quest	ions for Repo	orting Purposes		
16.	What kind of debts do you have?	16a. A	e your debts primarily of	consumer debts? Consumer debts are cronal, family, or household purpose."	tefined in 11 U.S.C. § 101(8) as "incurred by an
	you nave i		No. Go to line 16b.		
			Yes. Go to line 17.		
		16b. A	re your debts primarily boney for a business or inv	ousiness debts? Business debts are del restment or through the operation of the b	ots that you incurred to obtain pusiness or investment.
			No. Go to line 16c.		
			Yes. Go to line 17.		
		16c. S	ate the type of debts you	owe that are not consumer debts or busing	ness debts
17.	Are you filing under Chapter 7?	□ No. I a	nm not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	— res. aı	e paid that funds will be a	Do you estimate that after any exempt p vailable to distribute to unsecured credite	roperty is excluded and administrative expenses ors?
	are paid that funds will		l No		
	be available for distribution to unsecured creditors?	L	Yes		
18.	How many Creditors do	■ 1–49		1 ,000-5,000	25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000
		□ 100-199 □ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How much do you estimate your assets to	= \$0 - \$50,	000	□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion
	be worth?	□ \$50,001	•	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
		□ \$100,00 □ \$500,00	- \$500,000 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	\$0 - \$50,	000	□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion
	estimate your liabilities to be?	\$50,001		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
		_ ` `	! - \$500,000 ! - \$1 million	☐ \$100,000,001 - \$100 million	☐ More than \$50 billion
-		#300,00	- 41 (111111011		
Par	t 7: Sign Below				
For	you	I have exam	ined this petition, and I de	eclare under penalty of perjury that the in	formation provided is true and correct.
		If I have cho United State	sen to file under Chapter s Code. I understand the	7, I am aware that I may proceed, if eligil relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
		If no attorne document, I	y represents me and I did have obtained and read t	not pay or agree to pay someone who is he notice required by 11 U.S.C. § 342(b)	not an attorney to help me fill out this .
		I request rel	ief in accordance with the	chapter of title 11, United States Code,	specified in this petition.
		I understand bankruptcy and 3571.	l making a false statemen case can resultin fines ur	nt, concealing property, or obtaining mone \$250,000, or imprisonment for up to 2	ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ John A		/s/ Cherri J. L	
		John A. L Signature o		Cherri J. Lov Signature of De	
		Executed or	December 20, 2016 MM / DD / YYYY		December 20, 2016 MM / DD / YYYY

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Debtor 1 John A. Love Debtor 2 Cherri J. Love	Case number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certly that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) apples, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect Isi Mark E. Zaleski

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		DUCUIIIEIIL	Faue 10 01 39	
ill in this infor	mation to identify your	case:		
Debtor 1	John A. Love			
	First Name	Middle Name	Last Name	
Debtor 2	Cherri J. Love			
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case number _				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	34,490.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	34,490.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	30,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,200.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	111,940.00
	Your total liabilities	\$	148,140.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,255.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,130.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known)

Debtor 1 John A. Love

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,888.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	6,200.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,200.00

Debtor 2

Cherri J. Love

	Case 10-02333	Docume Docume		10 13.00.44 De	30 Maii i	
Fill in this in	formation to identify your		III Paue 12 01 59			
Debtor 1	John A. Love First Name	Middle Name	Last Name			
Debtor 2	Cherri J. Love					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS			
					_	
Case numbe	r				Check if this is an	
					amended filing	
Official	Form 106A/B					
Sched	ule A/B: Prop	ertv			12/15	
			nce. If an asset fits in more than o	ne category, list the asset in	the category where you	
think it fits bes	st. Be as complete and accur	ate as possible. If two married	d people are filing together, both a	re equally responsible for su	pplying correct	
information. If Answer every (a separate sheet to this form	n. On the top of any additional pag	es, write your name and case	e number (if known).	
	4.00					
Part 1: Desc	ribe Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In			
1. Do vou own	or have any legal or equitab	le interest in anv residence, b	uilding, land, or similar property?			
20 ,000 0	or mare any regar or equitar	, 100.000, 2	aag,a, e. ea. p. epey.			
No. Go to	Part 2.					
☐ Yes. Wh	ere is the property?					
Part 2: Desc	ribe Your Vehicles					
Do you own	lease or have legal or eg	uitable interest in any veh	icles, whether they are registe	ared or not? Include any w	shicles you own that	
			le G: Executory Contracts and U		eriicies you own that	
	,	.,	,	, , , , , , , , , , , , , , , , , , , ,		
3. Cars, vans	s, trucks, tractors, sport u	tility vehicles, motorcycles	S			
□ No						
■ Yes						
- res						
3.1 Make:	Nissan	Who has an intorc	est in the property? Check one	Do not deduct secured cla	aims or exemptions. Put	
Model:		Debtor 1 only	st in the property? Check one	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
Year:	2016			Creditors with mave Clair	ms secured by Property.	
		Debtor 2 only		Current value of the	Current value of the	
	nformation:	Debtor 1 and De	·	entire property?	portion you own?	
vehic		At least one of t	he debtors and another			
Verilo	ie	☐ Check if this is	community property	\$22,000.00	\$22,000.00	
		(see instructions)	community property			
			al vehicles, other vehicles, and sels, snowmobiles, motorcycle a			
Ехатрю.	boats, trailers, motors, perc	onar waterorant, norming vest	olo, showmobiles, motorcycle a	5005001105		
☐ No						
■ Yes						
— 103						
4.1 Make:		Who has an intere	est in the property? Check one	Do not deduct secured cla	aims or exemptions. Put	
		□ 5 · · · ·		the amount of any secure	ed claims on Schedule D:	
Model:		Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.	
Year:	1979	Debtor 2 only		Current value of the	Current value of the	
~		Debtor 1 and De		entire property?	portion you own?	
Other i	nformation:	I I At least one of t	he debtors and another			

page 1 Official Form 106A/B Schedule A/B: Property

 $\hfill\square$ Check if this is community property

Mobile home

\$7,500.00

\$7,500.00

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	John A. Lov Debtor 2 Cherri J. Lo		if known)
5	Add the dollar value of pages you have attach	the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here	r => \$29,500.00
P	art 3: Describe Your Perso	onal and Household Items	
		legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and a Examples: Major appliar ☐ No Yes. Describe	furnishings nces, furniture, linens, china, kitchenware	
		Furniture, furnishings, appliances and misc. other items	\$1,500.00
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; I phones, cameras, media players, games	music collections; electronic devices
		TVs, computer, printer, small electornic items	\$500.00
8.		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles	np, coin, or baseball card collections;
		Books, pictures, dvds, music cds and misc. other items	\$250.00
9.	Equipment for sports a Examples: Sports, photo musical instr No Yes. Describe	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
		Misc. sporting goods and recreational items; 4 fire arms	\$1,000.00
	■ No □ Yes. Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories	
	- res. Describe	Debtario elethine	\$500.00
_		Debtor's clothing	
12	2. Jewelry Examples: Everyday je □ No ■ Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
		Rings, watches and misc. other items	\$750.00
_			

page 2

Case 16-82939 Doc 1 Filed 12/21/16 Entered 12/21/16 15:00:44 Desc Main Page 14 of 59 Document Debtor 1 John A. Love Debtor 2 Cherri J. Love Case number (if known) 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list Yes. Give specific information..... Misc. household implements and tools \$150.00 \$200.00 lawn mower and misc. lawn equipment 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,850.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash from \$100.00 wages 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Citizens State Bank, Stockton, IL \$20.00 Checking 17.1. \$20.00 Citizens State Bank, Stockton, IL 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them.....

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Name of entity:

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

% of ownership:

		Case 16-82939	Doc 1	Filed 12/21/16 Document	Entered 12/2 Page 15 of 59	1/16 15:00:44	Desc Main
	ebtor 1 ebtor 2	John A. Love Cherri J. Love				Case number (if known)	
	☐ Yes.	Give specific information a	bout them er name:				
21.		ment or pension accounts oles: Interests in IRA, ERIS		1(k), 403(b), thrift saving	s accounts, or other pe	ension or profit-sharing	plans
	■ Yes.	List each account separate Type o	ely. f account:	Institution r	name:		
				Retireme	nt account with em	ployer	Unknown
22.	Your s	ty deposits and prepaymon thare of all unused deposits coles: Agreements with land	s you have ma				nies, or others
	☐ Yes.			Institution r	name or individual:		
23.	Annuit No	ies (A contract for a period	ic payment o	f money to you, either fo	r life or for a number of	years)	
	☐ Yes	lssuer name	e and descrip	tion.			
24.		ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a			ogram, or under a qua	llified state tuition pro	ogram.
	Yes	Institution na	ame and desc	cription. Separately file the	ne records of any intere	ests.11 U.S.C. § 521(c)	:
25.	■ No	, equitable or future interests. Give specific information a		erty (other than anythin	g listed in line 1), and	I rights or powers exe	ercisable for your benefit
26.	Examµ ■ No	s, copyrights, trademarks bles: Internet domain name Give specific information a	s, websites, p			nts	
27.	Licens Examp ■ No	es, franchises, and other oles: Building permits, exclu	general inta usive licenses		n holdings, liquor licens	ses, professional licens	ies
		Give specific information a	about them				
M	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	□ No	funds owed to you Give specific information a	bout them, in	cluding whether you alre	ady filed the returns ar	nd the tax years	
						_	
			201	6 Tax refund (largely	EIC)	Federal	Unknown
29.	Exam _l ■ No	support bles: Past due or lump sum	, ,	usal support, child supp	ort, maintenance, divor	ce settlement, property	settlement
	☐ Yes.	Give specific information					

Official Form 106A/B Schedule A/B: Property

page 4

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Debto Debto			Case number (if known)	
			penefits, sick pay, vacation pay, workers' compen	sation, Social Security
	• •			
	Yes. Give specific information.	•		
		fe insurance; health savings accour	nt (HSA); credit, homeowner's, or renter's insuran	ce
— \		pany of each policy and list its value npany name:	Beneficiary:	Surrender or refund
	001	грану папіс.	Beneficiary.	value:
	Ter	m life policy		\$0.00
lf '		due you from someone who has ng trust, expect proceeds from a life	died e insurance policy, or are currently entitled to rece	ive property because
	No Yes. Give specific information.			
_E:	xamples: Accidents, employme	nether or not you have filed a law nt disputes, insurance claims, or rig	suit or made a demand for payment whits to sue	
■ I	No Yes. Describe each claim			
_	•	ted claims of every nature, include	ding counterclaims of the debtor and rights to	set off claims
■ I	No Yes. Describe each claim			
_	y financial assets you did no	t already list		
■ I	No Yes. Give specific information.			
			g any entries for pages you have attached	\$140.00
Part 5:	Describe Any Business-Relate	d Property You Own or Have an Intere	est In. List any real estate in Part 1.	
37. Do	– you own or have any legal or equ	uitable interest in any business-relate	d property?	
	o. Go to Part 6.			
ЦΥ	es. Go to line 38.			
Part 6:	Describe Any Farm- and Comm If you own or have an interest in	nercial Fishing-Related Property You farmland, list it in Part 1.	Own or Have an Interest In.	
_	you own or have any legal o	r equitable interest in any farm-	or commercial fishing-related property?	
	Yes. Go to line 47.			
Part 7:	Describe All Property You	Own or Have an Interest in That You	Did Not List Above	
	you have other property of a xamples: Season tickets, count	any kind you did not already list? ry club membership		
■ !	No Yes. Give specific information			
54. A	add the dollar value of all of y	our entries from Part 7. Write tha	t number here	\$0.00
Official	Form 106A/B	Schedule A/E	B: Property	page

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Debtor 1 John A. Love
Debtor 2 Cherri J. Love Case number (if known)

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$29,500.00		
57.	Part 3: Total personal and household items, line 15	\$4,850.00		
58.	Part 4: Total financial assets, line 36	\$140.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$34,490.00	Copy personal property total	\$34,490.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$34,490.00

Official Form 106A/B Schedule A/B: Property page 6

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		DUCUITIO	IIL FAU C 10 UI 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	John A. Love			
	First Name	Middle Name	Last Name	
Debtor 2	Cherri J. Love			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	----------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1979 Mobile home	\$7,500.00		\$7,500.00	735 ILCS 5/12-901
Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	
Furniture, furnishings, appliances and misc. other items	\$1,500.00		\$1,200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TVs, computer, printer, small electornic items	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Books, pictures, dvds, music cds	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
Misc. sporting goods and recreational items; 4 fire arms	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	

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John A. Love Debtor 1 Debtor 2 Cherri J. Love Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Debtor's clothing** 735 ILCS 5/12-1001(a) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Rings, watches and misc. other 735 ILCS 5/12-1001(b) \$750.00 \$750.00 items Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Misc. household implements and 735 ILCS 5/12-1001(b) \$150.00 \$150.00 tools Line from Schedule A/B: 14.1 100% of fair market value, up to any applicable statutory limit lawn mower and misc. lawn 735 ILCS 5/12-1001(b) \$200.00 \$200.00 equipment Line from Schedule A/B: 14.2 100% of fair market value, up to any applicable statutory limit Cash from wages 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Retirement account with employer 735 ILCS 5/12-1006 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: 2016 Tax refund (largely 735 ILCS 5/12-1001(b) Unknown \$3,800.00 EIC) Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

2	Are you claiming a	l	 	かんたい つつだり

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Case 16-82939			0:44 Desc M	1ain
in this information to identify y				
John A. Love First Name	Middle Name Last Na	ame .		
otor 2 Use if, filing) Cherri J. Love First Name		ame		
ted States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINOIS			
se number own)			_	if this is an ded filing
icial Form 106D hedule D: Creditor	rs Who Have Claims Sec	ured by Property	,	12/15
any creditors have claims secured	by your property?			
☐ No. Check this box and submi	t this form to the court with your other schedu	ules. You have nothing else to	report on this form.	
■ Yes. Fill in all of the information	n below.			
t 1: List All Secured Claims				
each claim. If more than one creditor h	as a particular claim, list the other creditors in Part	2. As Amount of claim Do not deduct the	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Nissan Motor	Describe the property that secures the clair	* 20,000,00		\$8,000.00
Creditor's Name	2016 Nissan Murano vehicle		,	40,000
POB 660366	apply.	that		
Number, Street, City, State & Zip Code	Unliquidated Disputed			
o owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage car loan)	e or secured		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's	lien)		
At least one of the debtors and anothe	3			
	☐ Other (including a right to offset)			
Check if this claim relates to a community debt	— United (moldaring a right to onset)			
	in this information to identify your of the property of the pr	in this information to identify your case: Intor 1 John A. Love First Name Middle Name Last N Cherri J. Love First Name Middle Name Last N Cherri J. Love First Name Middle Name Last N NORTHERN DISTRICT OF ILLINOIS Re number Decomplete and accurate as possible. If two married people are filling together, both edded, copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, and attach it to this foed (copy the Additional Page, fill it out, number the entries, a	In this information to identify your case: Itor 1 John A. Love	The state of the s

Add the dollar value of your entries in Column A on this page. Write that number here: \$30,000.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$30,000.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-82939 Doc 1 Filed 12/21/16 Entered 12/21/16 15:00:44 Desc Main

Page 21 of 59 Document Fill in this information to identify your case: Debtor 1 John A. Love Middle Name Last Name First Name Debtor 2 Cherri J. Love (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 California Dept of Child Support Last 4 digits of account number Unknown Unknown Unknown Priority Creditor's Name POB 989069 When was the debt incurred? West Sacramento, CA 95798 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Domestic support obligations ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes Child support 2.2 **IL Child Support Enforcement** Last 4 digits of account number \$6,200.00 \$6,200.00 \$0.00 Priority Creditor's Name When was the debt incurred? 509 S. 6th Street Springfield, IL 62701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated ☐ Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another Domestic support obligations ☐ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government Is the claim subject to offset? Claims for death or personal injury while you were intoxicated ■ No

Official Form 106 F/F

☐ Yes

Child support

☐ Other. Specify

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	or 1 John A. Love	Case number (if know)				
	2: List All of Your NONPRIORITY Unsecu	urod Claime				
	o any creditors have nonpriority unsecured claim					
	No. You have nothing to report in this part. Submit	this form to the court with your other schedules.				
	Yes.					
4. L	ist all of your nonpriority unsecured claims in the	alphabetical order of the creditor who holds each claim. If a creditor has more that	an one nonpriority			
		aim. For each claim listed, identify what type of claim it is. Do not list claims already inc creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the				
	art 2.	· · · · · · · · · · · · · · · · · · ·	ŭ			
			Total claim			
4.1	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number 2211	\$2,000.00			
	PO Box 790216	When was the debt incurred?	_			
	Saint Louis, MO 63179-0216 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit card purchases	-			
4.2	Capital One Bank	Last 4 digits of account number 8905	\$4,500.00			
	Nonpriority Creditor's Name PO Box 5294	When was the debt incurred?				
	Carol Stream, IL 60197-5294	When was the dest incurred:	-			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	☐ Debtor 1 only	Contingent				
	■ Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit card purchases				

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Debto Debto	or 1 John A. Love Cherri J. Love	Case number (if know)	
4.3	Care Credit	Last 4 digits of account number 6587	\$600.00
	Nonpriority Creditor's Name GE Money Bank PO Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	\$600.00
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.4	Citizens State Bank Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	102 West Main Street PO Box 396 Lena, IL	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Co Signor on vehicle	
4.5	One dit One Devil	4000	#4.400.00
4.5	Credit One Bank Nonpriority Creditor's Name PO Box 60500	Last 4 digits of account number 4928 When was the debt incurred?	\$1,100.00
	City Of Industry, CA 91716-0500 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Credit card purchases	

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Debte Debte	or 1 John A. Love or 2 Cherri J. Love	Case number (if know)	
4.6	Dupaco Community Credit Union	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO Box 179	When was the debt incurred?	<u> </u>
	Dubuque, IA 52004-0179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.7	Fingerhut	Last 4 digits of account number 3910	\$2,400.00
	Nonpriority Creditor's Name PO Box 166 Newark, NJ 07101-0166	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Mail orders	
4.8	First Premier Bank	Last 4 digits of account number 9360	\$790.00
	Nonpriority Creditor's Name PO Box 5529 Sioux Falls, SD 57117-5529	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	

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Debto Debto	r 1 John A. Love r 2 Cherri J. Love	Case number (if know)	
4.9	Freeport Health Network	Last 4 digits of account number	\$7,000.00
	Nonpriority Creditor's Name Central Business Office PO Box 268	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	<u> </u>	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical expenses	
4.1	Heights Finance Corporation	Last 4 digits of account number	\$650.00
	Nonpriority Creditor's Name PO Box 876 Freeport, IL 61032-0876	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.1	Illinois Dept. Of Human Services	Last 4 digits of account number	\$70,000.00
	Nonpriority Creditor's Name Cash Management unit PO Box 19407	When was the debt incurred?	
	Springfield, IL 62794 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Alledged overpayments	

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2 Cherri J. Love	Case number (if know)						
Kay Jewelers	Last 4 digits of account number 8287	\$5,000.00					
Nonpriority Creditor's Name PO Box 740425	When was the debt incurred?						
Cincinnati, OH 45274-0425 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
☐ Debtor 1 only	☐ Contingent						
■ Debtor 2 only	□ Unliquidated						
☐ Debtor 1 and Debtor 2 only	□ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
□ Yes	■ Other. Specify Credit card purchases						
One Main Financial	Last 4 digits of account number 8190	\$8,000.00					
Nonpriority Creditor's Name 3207 East LincoInway Sterling, IL 61081	When was the debt incurred?						
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
Check if this claim is for a community	Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
No	☐ Debts to pension or profit-sharing plans, and other similar debts						
■ No □ Yes							
⊔ Yes	Other. Specify Loan						
Sears	Last 4 digits of account number	Unknown					
Nonpriority Creditor's Name PO Box 182149	When was the debt incurred?						
Columbus, OH 43218-2149 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
Who incurred the debt? Check one.	, a contract the same state of contract and capper,						
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	□ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
debt	\square Obligations arising out of a separation agreement or divorce that you did not						
Is the claim subject to offset?	report as priority claims						
No	Debts to pension or profit-sharing plans, and other similar debts						
□Yes	■ Other. Specify Credit card purchases						

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Cherri J. Love	Case number (if know)	
The Monroe Clinic	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 2009 5th Street	When was the debt incurred?	
Monroe, WI 53566-1575 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Medical expenses	
U.S Department of Education	Last 4 digits of account number 904	\$5,300.00
Nonpriority Creditor's Name		
Direct Loan Servicing Center PO Box 4609	When was the debt incurred?	
Utica, NY 13504-4609 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
<u></u>		
☐ Yes	Other. Specify Student Loans	
Walmart / GEMB	Last 4 digits of account number 0362	\$4,600.00
Nonpriority Creditor's Name PO Box 960024	When was the debt incurred?	
Orlando, FL 32896-0024 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 2 Cherri J. Love		Case number (if know)	
Name and Address Alltran Health Inc POb 519 Sauk Rapids, MN 56379	On which entry in Part 1 or Part 2 Line 4.9 of (Check one): Last 4 digits of account number	e did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Capital One Bank PO Box 5294 Carol Stream, IL 60197-5294	On which entry in Part 1 or Part 2 Line 4.1 of (<i>Check one</i>): Last 4 digits of account number	e did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Fingerhut Direct Marketing 6250 Ridgewood Rd. Saint Cloud, MN 56303	On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address J.C. Christensen & Assoc. PO Box 519 Sauk Rapids, MN 56379-0519	On which entry in Part 1 or Part 2 Line 4.9 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address OneMain Financial PO Box 9001122 Louisville, KY 40290	On which entry in Part 1 or Part 2 Line 4.13 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address The Monroe Clinic Hospital 515 22nd Avenue Monroe, WI 53566	On which entry in Part 1 or Part 2 Line 4.15 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Windham Professionals POB 400 East Aurora, NY 14052	On which entry in Part 1 or Part 2 Line 4.16 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 6,200.00
Total claims				
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 6,200.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims				
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 111,940.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 111,940.00

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Debtor 1 **John A. Love** Debtor 2 **Cherri J. Love**

Case number (if know)

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		Dodanic	11 1 440 88 81 88
Fill in this infor	mation to identify your	case:	
Debtor 1	John A. Love		
	First Name	Middle Name	Last Name
Debtor 2	Cherri J. Love		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Carole Zink Stockton, IL 61085	Monthly lot rent

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		Documen	t Page 31 o	of 59	
Fill in this	information to identify your	case:			
Debtor 1	John A. Love				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) Cherri J. Love First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Case numl (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
people are ill it out, a our name	filing together, both are equ	ally responsible for supply boxes on the left. Attach t . Answer every question.	ring correct informati he Additional Page to	ion. If more space is no o this page. On the top	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
■ No					
■ No	3				
	hin the last 8 years, have you a, California, Idaho, Louisiana,				states and territories include
_	Go to line 3. s. Did your spouse, former spouse.	use, or legal equivalent live v	vith you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaranto	r or cosigner. Make s	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Name			_ ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street			_	

State

City

ZIP Code

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Fill	in this information to identify your c	ase.					ı					
	otor 1 John A. Lov											
	otor 2 Cherri J. Lo	ve				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILL	INOIS								
	se number lown)		-				☐ A supp	ended filing element sho	l wing postpetition cha ne following date:	pter		
0	fficial Form 106I						MM / D	DD/ YYYY				
S	chedule I: Your Inc	ome								12/1		
atta	use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment Fill in your employment		onal pag	es, write you			d case numbe	r (if known	ı). Answer every que			
	information.		Debto	Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with	Employment status	■ Employed				■ Employed					
	information about additional		☐ Not employed				☐ Not employed					
	employers.	Occupation	Secui	rity			Mail carrier					
	Include part-time, seasonal, or self-employed work.	Employer's name	Apple	Canyon La	ke		US Postal Service					
	Occupation may include student or homemaker, if it applies.	Employer's address		14A157 Canyon Club Apple River, IL 61001								
		How long employed t	here?	5 years				7 years	S	_		
Par	t 2: Give Details About Mo	nthly Income										
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have	nothing to rep	ort for	any	line, write \$0 ir	n the space	. Include your non-filir	ıg		
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine th	e information f	for all e	emplo	oyers for that p	erson on th	ne lines below. If you i	need		
							For Debtor 1		Debtor 2 or a-filing spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	2,550	.00 \$_	2,300.00			
3.	Estimate and list monthly over	ime pay.			3.	+\$	0.	.00 +\$	0.00			

2,550.00

2,300.00

Calculate gross Income. Add line 2 + line 3.

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	toi i	John A. Love Cherri J. Love	-		Case	e number (if k	nown) _					
	0	v line A hore	4			r Debtor 1	2.04			Debtor filing s	pous		
	Copy	y line 4 here	4.		\$_	2,550	0.00	<u>)</u>	» —	2,	300.	.00	
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	640	0.00)	\$		525.	00	
	5b.	Mandatory contributions for retirement plans	5b).	\$		0.00	_	\$.00	
	5c.	Voluntary contributions for retirement plans	5c	:.	\$		0.0)	\$		0.	.00	
	5d.	Required repayments of retirement fund loans	5d	l.	\$		0.00)	\$		0.	.00	
	5e.	Insurance	5e) .	\$	280	0.0)	\$		0.	.00	
	5f.	Domestic support obligations	5f.		\$_		0.0)	\$		0.	.00	
	5g.	Union dues	5g	J.	\$_		0.0	_	\$.00	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_		0.00) +	- \$		0.	.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	920	0.0)	\$		525.	.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,630	0.0)	\$	1,	775.	.00	
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$		0.00	1	\$		0	.00	
	8b.	Interest and dividends	8b		\$		0.00	_	\$			00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	: .	\$		0.00	_)	\$		0.	.00	
	8d.	Unemployment compensation	8d	l.	\$		0.00)	\$		0.	.00	
	8e.	Social Security	8e) .	\$		0.00)	\$		0.	.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00)	\$		0.	.00	
	8g.	Pension or retirement income	8g	J.	\$	(0.0)	\$		0.	.00	
	8h.	Other monthly income. Specify: Part time jobs	_ 8h	1.+	\$_	850	0.0) +	· \$		0.	.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	850	0.0)	\$		(0.00	
10	Cala	ulate monthly income. Add line 7 . line 0	40	Φ.		0.400.00	1.[75.00	•		4 055 00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ _		2,480.00		⊅ —	1,7	75.00	= \$		4,255.00
11.	State Inclu	de all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a second contribution.	depe							chedule 11.			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines								12.	\$_		4,255.00
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No.	?							·		nbine nthly	ed income
		Yes. Explain:											

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Fill	in this informa	ation to identify yo	our case:			ī			
Deb		John A. Love				Ch	neck if	this is:	
JOHN A. LOVE								amended filing	
	tor 2 ouse, if filing)	Cherri J. Lov	/e						ving postpetition chapter the following date:
								·	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLII	NOIS		MM	I / DD / YYYY	
	e number nown)								
Of	fficial Fo	rm 106J							
So	chedule	J: Your l	Exper	ises					12/1
Be info	as complete ormation. If m	and accurate as	possible eded, atta	If two married people a					
Par		ribe Your House	hold						
1.	Is this a joir								
	□ No. Go to	o line 2. es Debtor 2 live i	in a senar	ate household?					
	= 103. 200		iii a sepai	ate nousenoid:					
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtor 2	2.	
2.	Do you have	e dependents?	□ No	•	•				
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?
	Do not state dependents				Son			16	□ No ■ Yes
					0			47	□ No
					Son			17	■ Yes □ No
									☐ Yes
									□ No
3.	Do your exp	penses include	_	No					☐ Yes
	expenses o	f people other ti	han $_{m au}$	Yes					
		d your depende							
exp	imate your ex		our bankr	uptcy filing date unless					opter 13 case to report f the form and fill in the
				government assistance luded it on <i>Schedule I:</i>					
(Off	ficial Form 10)6I.)						Your expe	enses
4.		or home owners		ses for your residence. r lot.	Include first mortgag	e 4.	\$		75.00
	If not includ	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	4b. Prope	erty, homeowner's				4b.	\$		0.00
			•	ipkeep expenses		4c.			150.00
5.		owner's associat		oominium dues our residence, such as h	ome equity loans	4d. 5.	_		0.00

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	otor 1 otor 2	John A. Cherri J		Cas	se num	ber (if knov	wn)			
6.	Utiliti	ies.								
0.	6a.		, heat, natural gas		6a.	\$	300.00			
	6b.		wer, garbage collection		6b.		50.00			
	6c.		e, cell phone, Internet, satellite, and cable service	ces	6c.		125.00			
	6d.	•	ecify: cable/internet		6d.		100.00			
7.	Food		sekeeping supplies		7.	\$	850.00			
8.	Childcare and children's education costs					\$	0.00			
9.	Cloth	hing, laund	lry, and dry cleaning		9.	\$	200.00			
10.	Perso	onal care	products and services		10.	\$	100.00			
11.			ental expenses		11.	\$	150.00			
12.	Trans	Transportation. Include gas, maintenance, bus or train fare.								
	Do no	ot include of	car payments.		12.	·	350.00			
			clubs, recreation, newspapers, magazines, a	and books	13.		125.00			
			tributions and religious donations		14.	\$	0.00			
15.	Insur									
			nsurance deducted from your pay or included in	lines 4 or 20.	150	¢	0.00			
		Life insura Health ins			15a. 15b.		0.00			
		Vehicle in				· ·	0.00			
					15c.	·	125.00			
16			urance. Specify: nclude taxes deducted from your pay or included	d in lines 4 or 20	15d.	Φ	0.00			
10.	Spec		icide taxes deducted from your pay or included	in lines 4 or 20.	16.	\$	0.00			
17.			ease payments:		4-7	•				
			ents for Vehicle 1		17a.	·	880.00			
			nents for Vehicle 2		17b.	· —	0.00			
		Other. Sp			17c.	· -	0.00			
		Other. Sp	•		17d.	\$	0.00			
18.			of alimony, maintenance, and support that y		18.	\$	450.00			
19.			your pay on line 5, Schedule I, Your Income s you make to support others who do not live		10.	\$	0.00			
10.	Spec		5 you make to support others who do not his	o willi you.	19.	Ψ	0.00			
20.			perty expenses not included in lines 4 or 5 of	this form or on Schedule	-	our Incom	ne.			
_0.			s on other property		20a.		0.00			
		Real esta			20b.	\$	0.00			
	20c.	Property,	homeowner's, or renter's insurance		20c.	\$	0.00			
			nce, repair, and upkeep expenses		20d.		0.00			
			ner's association or condominium dues		20e.	\$	0.00			
21.	Othe	r: Specify:	Misc. school/activity fees		21.	+\$	100.00			
22	Cala	uloto ve··-								
22.		-	monthly expenses I through 21.			\$	4 420 00			
				Official Form 106 L 2		\$	4,130.00			
			22 (monthly expenses for Debtor 2), if any, from			l				
	22c. /	Add line 22	a and 22b. The result is your monthly expenses	5.		\$	4,130.00			
23.	Calculate your monthly net income.									
	23a.	Copy line	12 (your combined monthly income) from Sched	dule I.	23a.	\$	4,255.00			
			r monthly expenses from line 22c above.		23b.	-\$	4,130.00			
	23c.		your monthly expenses from your monthly incom	ne.	222	¢	125.00			
			t is your monthly net income.		23c.		123.00			
24.	For ex modifi	xample, do y ication to the	an increase or decrease in your expenses we ou expect to finish paying for your car loan within the yeterms of your mortgage?				increase or decrease because of a			
	■ No									
	□Y€	es.	Explain here:							

Fill in this inf	ormation to identify your	case:			
Debtor 1	John A. Love				
	First Name	Middle Name	Last Name		
Debtor 2	Cherri J. Love				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if	f this is an
				amende	d filing
	orm 106Dec ation About a	ın Individual	Debtor's Sch	edules	12/15
f two married	people are filing together	r, both are equally respor	nsible for supplying correc	et information.	
obtaining mor	ney or property by fraud in	n connection with a bank		aking a false statement, concealing ines up to \$250,000, or imprisonmer	
ears, or both	. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
S	ign Below				
Did you	pay or agree to pay some	one who is NOT an attorn	ney to help you fill out ban	kruptcy forms?	
■ No					
□ Ves	. Name of person			Attach Bankruptcy Petition Pre	narer's Notice
				Declaration, and Signature (Of	
l la dou ao	maltir of maritime I dealers	that I have road the army	mam, and ashadulas filed w	uith this declaration and	
	are true and correct.	that I have read the Sumi	mary and schedules filed v	vith this declaration and	
	ohn A. Love		X /s/ Cherri J. L		
	n A. Love		Cherri J. Lov		
Signa	ature of Debtor 1		Signature of De	eptor 2	
Date	December 20, 2016		Date Decem	nber 20, 2016	

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Fill in this infor	mation to identify your	case.			
Debtor 1	John A. Love First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Cherri J. Love	Middle Name	Last Name		
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Office Oracio 2					
Case number (if known)					eck if this is an nended filing
- 			 _		
Official For	m 106Dec				
Dinciairo	tion About	n Individual	Debtor's Sch	nedules	12/15
	18 U.S.C. §§ 152, 1341,				
31	ign Below				
Did you	pay or agree to pay som	eone who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	on Preparer's Notice, ire (Official Form 119)
Under pe	nalty of perjury, I declar are true and correct)	e that I have read the sur	mmary and schedules filed	l with this declaration and	0
	//	/ Le	X /s/ Cherri J.	Love () DAHH =	L
	ohn A. Love		Cherri J. Lo	ove	
	ature of Debtor 1		Signature of I	Debtor 2	
Data	December 20, 2016		Date Dece	ember 20, 2016	

Date December 20, 2016

Fill	in this inforn	nation to identify you	r case:			
	otor 1	John A. Love	-			
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	Cherri J. Love First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
		. ,				
	se number own)				_	heck if this is an mended filing
∩f	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/16
info	rmation. If m	ore space is needed,	attach a separate sheet to		equally responsible for supply additional pages, write you	
	<u> </u>	n). Answer every que				
			erital Status and Where You	I Lived Before		
1.	What is your	current marital statu	is?			
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory	
	■ No					
	☐ Yes. Ma	ke sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$36,700.00	■ Wages, commissions, bonuses, tips	\$28,500.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 John A. Love Debtor 2 Cherri J. Love Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$29,000.00 \$40,000.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$28,100.00 \$27,000.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source (before deductions Describe below. (before deductions and and exclusions) exclusions) For last calendar year: income tax refund \$7,800.00 (January 1 to December 31, 2015) For the calendar year before that: \$7,300.00 income tax refund (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

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Debtor 2 Cherri J. Love Case number (if known) Amount you **Creditor's Name and Address** Dates of payment **Total amount** Was this payment for ... still owe paid **Nissan Motor Acceptance** Monthly car \$880.00 \$30,000.00 ■ Mortgage Bankruptcy Dept. payment ☐ Car POB 660366 ☐ Credit Card Dallas, TX 75266 ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes

Debtor 1

John A. Love

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	btor 2 Cherri J. Love		Case number	(if known)	
Par	rt 5: List Certain Gifts and Contributio	ons			
3.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift.	kruptcy, di	id you give any gifts with a total value of more	than \$600 per person′	?
	Gifts with a total value of more than \$6 per person Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value
4.	Within 2 years before you filed for bank No		id you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	on. Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	ruptcy or s	since you filed for bankruptcy, did you lose any	rthing because of thef	t, fire, other disaster
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfe	ers			
	consulted about seeking bankruptcy or	r preparin	I you or anyone else acting on your behalf pay g a bankruptcy petition? , or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	: You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Attorney Mark E. Zaleski 10 N. Galena Ave., #220 Freeport, IL 61032 attyzaleski@comcast.net		\$1105.00 for attorney fees \$335.00 for court filing fees \$40.00 for credit counseling fees/debtor education fees		\$1,105.00
7.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer that	editors or		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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John A. Love Debtor 1 Debtor 2 Cherri J. Love

Case number (if known)

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already in the work in the work included in the work in the	usiness or financial affa ade as security (such as t	airs? he granting of a se		
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or debter paid in exchange	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a se	elf-settled trust or similar devi	ce of which you are a
	Name of trust	Description and v	alue of the prope	rty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Stora	age Units	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association No	r other financial accour	nts; certificates of	•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details.	rear before you filed for	bankruptcy, any	safe deposit box or other dep	pository for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o	or place other than your	home within 1 ye	ear before you filed for bankru	uptcy?
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that sor for someone. No Yes. Fill in the details.	neone else owns? Inclu	ude any property <u>y</u>	you borrowed from, are storii	ng for, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value
Par	t 10: Give Details About Environmental Info	ormation			
or	the purpose of Part 10, the following definition	ons apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 **John A. Love** Debtor 2 **Cherri J. Love**

Case number (if known)

	toxic substances, wastes, or material into t regulations controlling the cleanup of these	· · · · · · · · · · · · · · · · · · ·	water, or other medium, including s	tatutes or	
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.				
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				
Rep	ort all notices, releases, and proceedings th	at you know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you tha	t you may be liable or potentially liable	under or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of	any release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.	
	■ No				
	Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	t11: Give Details About Your Business or	Connections to Any Business			
27.	Within 4 years before you filed for bankrup	cy, did you own a business or have any	of the following connections to an	y business?	
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time		
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	p (LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing ex	ecutive of a corporation			
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation			
	■ No. None of the above applies. Go to I	Part 12.			
	☐ Yes. Check all that apply above and fill	in the details below for each business.			
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	ccy, did you give a financial statement to	anyone about your business? Incl	ude all financial	
	■ No				

Name

Date Issued

Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code) Case 16-82939 Doc 1 Filed 12/21/16 Entered 12/21/16 15:00:44 Desc Main Document Page 44 of 59

Debtor 1	John A. Love		
Debtor 2	Cherri J. Love		Case number (if known)
Part 12:	Sign Below		
are true a with a ba	and correct. I understand that making	ng a false statement	nd any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Johr	n A. Love	/s/ Ch	erri J. Love
John A.	. Love	Cherr	i J. Love
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date D	ecember 20, 2016	Date	December 20, 2016
Did you a □ No ■ Yes	nttach additional pages to Your Sta	ntement of Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
, ,	oay or agree to pay someone who i	s not an attorney to	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	ame of Person Attach the Ba	ankruptcy Petition Prej	parer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	nation to identify your	case:			
Debtor 1	John A. Love				
	First Name	Middle Name	Last Name		
Debtor 2	Cherri J. Love				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number				☐ Check if	this is an
(**************************************				amende	
Be as complete a information. If m	ind accurate as possib ore space is needed, a	ole. If two married people attach a separate sheet to	iduals Filing for Ba are filing together, both are ed this form. On the top of any a	ually responsible for supplying dditional pages, write your nam	correct e and case
Part 12: Sign E	n). Answer every quesi Below	ion.			
are true and corr with a bankrupto	ect. I understand that it y case can result in fir 1341, 1519, and 3571.	making a false statement nes up to \$250,000, or imp /s/ Ch Cheri	nd any attachments, and I decl t, concealing property, or obtai prisonment for up to 20 years, nerri J. Love ri J. Love ture of Debtor 2	0	t the answers I in connection
Date Decemb	er 20, 2016	Date	December 20, 2016		
■ No □ Yes				r Bankruptcy (Official Form 107)	?
■ No			help you fill out bankruptcy for parer's Notice, Declaration, and		

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Fill in this infor	mation to identify your	case:		
Debtor 1	John A. Love			
	First Name	Middle Name	Last Name	-
Debtor 2	Cherri J. Love	AC. 1 11 A.		-
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	_
Case number				
(if known)				☐ Check if this is an amended filing
			/iduals Filing Under Cha	pter 7 12/15
creditors hav	e claims secured by yo	ur property, or		
You must file thi	ever is earlier, unless th	ithin 30 days after	not expired. You file your bankruptcy petition or by the danger time for cause. You must also send copies t	
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying corre	ect information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	a Secured Claims		
1. For any credit	-		D: Creditors Who Have Claims Secured by Prop What do you intend to do with the property	, , , , , , , , , , , , , , , , , , , ,
			secures a debt?	as exempt on Schedule C?
Creditor's N name:	lissan Motor Accepta	ance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	2016 Nissan Murar	10	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	vehicle		☐ Retain the property and [explain]:	
Part 2: List Y	our Unexpired Persona	l Branarty Lagge		
For any unexpire in the information	ed personal property le on below. Do not list rea	ase that you listed Il estate leases. Ur	in Schedule G: Executory Contracts and Unexperied leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 36	et; the lease period has not yet ended.
Describe your u	inexpired personal proj	perty leases		Will the lease be assumed?
Logophic				
Lessor's name: Description of lea	ased			□ No
Property:	-			☐ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
Lessor's name:				
Official Form 108		Statement of Ir	ntention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 John A. Love Cherri J. Love	Case number (if known)
Description of leased Property:	□ No
	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes

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Debto Debto		John A. Love Cherri J. Love		Case number (if known)	
Part 3	s s	ign Below			
	•	lty of perjury, I declare that I have inc at is subject to an unexpired lease.	licated my intention about	t any property of my estate that secures a debt and any personal	
χ /	s/ Jo	hn A. Love	X	/s/ Cherri J. Love	
_	John	A. Love		Cherri J. Love	
5	Signat	rure of Debtor 1	;	Signature of Debtor 2	
[Date	December 20, 2016	Date	te _ December 20, 2016	

Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 3
Debtor 3
Debtor 4
Debtor 5
Debtor 5
Debtor 5
Debtor 6
Debtor 6
Debtor 6
Debtor 6
Debtor 7
Debtor 9
Deb

Filed 12/21/16

Doc 1

X /s/ John A. Love Johnson

Case 16-82939

John A. Love

Signature of Debtor 1

Date December 20, 2016

X /s/ Cherri J. Love Cherri J. Love Signature of Debtor 2

Date December 20, 2016 _____

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82939 Doc 1 Filed 12/21/16 Entered 12/21/16 15:00:44 Desc Main Document Page 54 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	John A. Love re Cherri J. Love		Case No.				
	0.16.11.10.1	Debtor(s)	Chapter	7			
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR D	EBTOR(S)			
1.	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,105.00			
	Prior to the filing of this statement I have received	ived	\$	1,105.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed	compensation with any other person u	unless they are men	nbers and associates of	of my law firm.		
	☐ I have agreed to share the above-disclosed com- copy of the agreement, together with a list of the				law firm. A		
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	of the bankruptcy	case, including:			
	a. Analysis of the debtor's financial situation, andb. Preparation and filing of any petition, schedulesc. Representation of the debtor at the meeting of cd. [Other provisions as needed]	s, statement of affairs and plan which	may be required;	-	kruptcy;		
б.	By agreement with the debtor(s), the above-disclose Negotiations with secured creditors reaffirmation agreements and applie 522(f)(2)(A) for avoidance of liens of actions, judicial lien avoidances, relative process.	s to reduce to market value; exe cations as needed; preparation n household goods; Representa	mption planning and filing of mot ation of the debt	ions pursuant to fors in any dischar	11 USC		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement bankruptcy proceeding.	of any agreement or arrangement for	payment to me for	representation of the	debtor(s) in		
ı	December 20, 2016	/s/ Mark E. Zalesk	i				
Ī	Date	Mark E. Zaleski					
		Signature of Attorney Attorney Mark E. I	Attorney Mark E. Zaleski				
		10 N. Galena Ave.	, #220				
		Freeport, IL 61032 815-233-0995 Fax					
		attyzaleski@como					
		Name of law firm					

ATTORNEY OF THE ACCREMENT
1) Client Name: BANKPUIPTCY CASE ATTORNEY/CLIENT ACREEMENT (A) (N) (N) (N) (N) (N) (N) (N) (N) (N) (N
2) Attorney Fee: Client will pay \$ 150. O as an advance payment retainer (this amount includes the court filing fee and the cost of the required credit counseling briefing). This fee covers the following attorney services: a) analysis of the client's financial situation and rendering advice in determining whether to file a petition in bankruptcy and under which chapter; b) preparation and filing of original petition, schedules and statement of financial affairs; c) representation of client at first meeting of creditors in Rockford. Attorney will begin working on Client's case and preparing the appropriate documents upon the receipt of a \$200.00 payment toward the total advance payment retainer. The first \$500.00 paid to the attorney is non-refundable under any circumstances. An explanation of the advance payment retainer is attached to this agreement.
The above fee does not include the following services: a) representation of client in any dischargeability action, lien avoidance action, relief from stay action or any adversary proceeding; b) negotiations with secured creditors such as mortgage or auto lenders; c) representation at creditor's meeting continued due to client's failure to appear at first meeting; d) preparation of amended documents caused by client's failure to provide accurate information; e) preparing/processing reaffirmation agreements. THIS INCLUDES ADDING ADDITIONAL CREDITORS AFTER CASE IS FILED. YOU WILL BE CHARGED EXTRA ANY TIME YOU CALL THE ATTORNEY AND REQUEST HE PERFORM A SPECIFIC TASK i.e. call your mortgage company, send a fax to a creditor, etc. Such additional work, if requested by client, is performed at the rate of \$25 0.00 per hour. If client's mortgage or vehicle lender forwards a reaffirmation agreement to attorney for processing, client will be charged a fee of \$100.00 per agreement. I agree that the attorney will not prepare or work on any reaffirmation agreement unless this fee is paid.
3) Until the above attorney fee and filing fee have been paid in full, and Attorney has received all information from Client, and Client has signed the appropriate documents, the bankruptcy petition will not be filed with the court. The Client is not provided protection by the bankruptcy code until the petition is filed with the court.
4) Client has received the Statement of Information required by 11 U.S.C. Section 341, Disclosures Pursuant to 11 U.S.C. Sec. 527 and Sec. 342 and has discussed all of the information contained in said documents with Attorney. Client and attorney have discussed the requirements of pre-bankruptcy counseling and pre-discharge debt management classes and Client understands that it is Client's responsibility to comply with and pay for said requirements. Client also understands that Attorney can obtain a credit report for Client for an additional \$40.00 fee.
5) Client accepts the responsibility for determining time periods, providing Attorney with proper information and accepts that risk that a debt will not be discharged and the risk of creditor action before the bankruptcy petition is filed.
6) Client agrees to list ALL DEBTS, ASSETS, INCOME, and EXPENSES and to tell the truth. Client is responsible for providing correct addresses for creditors.
7) Client agrees that Attorney will cease working for Client and close client's case if Client does not pay Attorney, fails to return documents or provide information. Attorney will refund any unearned fees to client at the rate of \$250.00 per hour.
8) Client understands that Attorney makes no representations, warranties, or guarantees concerning the outcome of this case. Client understands that statements of Attorney are statements of opinion only. DATE: DATE:
DATE:

WE <u>MUST</u> HAVE THE PAST 60 DAYS OF ALL PAY STUBS AND PAST 2 YEARS OF TAX RETURNS PRIOR TO FILING YOUR BANKRUPTCY CASE. IF WE DO NOT HAVE THESE DOCUMENTS, YOUR CASE <u>WILL NOT</u> BE FILED!

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United States Bankruptcy Court Northern District of Illinois

In re	John A. Love		Case No.	
mie	Cherri J. Love	Debtor(s)	Chapter Chapter	7
	VI	ERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	27
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	December 20, 2016	/s/ John A. Love John A. Love Signature of Debtor		
Date:	December 20, 2016	/s/ Cherri J. Love Cherri J. Love Signature of Debtor		

Alltran Health Inc POb 519 Sauk Rapids, MN 56379

California Dept of Child Support POB 989069
West Sacramento, CA 95798

Capital One Bank PO Box 790216 Saint Louis, MO 63179-0216

Capital One Bank PO Box 5294 Carol Stream, IL 60197-5294

Care Credit GE Money Bank PO Box 960061 Orlando, FL 32896-0061

Carole Zink Stockton, IL 61085

Citizens State Bank 102 West Main Street PO Box 396 Lena, IL

Credit One Bank PO Box 60500 City Of Industry, CA 91716-0500

Dupaco Community Credit Union PO Box 179
Dubuque, IA 52004-0179

Fingerhut PO Box 166 Newark, NJ 07101-0166

Fingerhut Direct Marketing 6250 Ridgewood Rd. Saint Cloud, MN 56303

First Premier Bank PO Box 5529 Sioux Falls, SD 57117-5529

Freeport Health Network Central Business Office PO Box 268 Freeport, IL 61032

Heights Finance Corporation PO Box 876 Freeport, IL 61032-0876

IL Child Support Enforcement 509 S. 6th Street Springfield, IL 62701

Illinois Dept. Of Human Services Cash Management unit PO Box 19407 Springfield, IL 62794

J.C. Christensen & Assoc. PO Box 519
Sauk Rapids, MN 56379-0519

Kay Jewelers PO Box 740425 Cincinnati, OH 45274-0425

Nissan Motor Acceptance Bankruptcy Dept. POB 660366 Dallas, TX 75266

One Main Financial 3207 East Lincolnway Sterling, IL 61081

OneMain Financial PO Box 9001122 Louisville, KY 40290 Sears PO Box 182149 Columbus, OH 43218-2149

The Monroe Clinic 2009 5th Street Monroe, WI 53566-1575

The Monroe Clinic Hospital 515 22nd Avenue Monroe, WI 53566

U.S Department of Education Direct Loan Servicing Center PO Box 4609 Utica, NY 13504-4609

Walmart / GEMB PO Box 960024 Orlando, FL 32896-0024

Windham Professionals POB 400 East Aurora, NY 14052